



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	09/872,938
		Filing Date	May 31, 2001
		First Named Inventor	Michael R. I
		Art Unit	2171
		Examiner Name	Leslie Wong
Total Number of Pages in This Submission	34	Attorney Docket Number	4667P005

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Technology Center 2100

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Return postcard.</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas S. Ferrill, Reg. No. 42,532 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	7-12-04

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Carla Vignola		
Signature		Date	July 12, 2004



# FEE TRANSMITTAL for FY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)  
420.00

## Complete if Known

Application Number 09/872,938  
Filing Date May 31, 2001  
First Named Inventor Michael R. Lynch  
Examiner Name Leslie Wong  
Art Unit 2171  
Attorney Docket No. 4667P005

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## METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None  
☒ Deposit Account

Deposit Account Number 02-2666  
Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
1	20*	0	\$0.00
Independent Claims	3*	0	\$0.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple Dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)

\*or number previously paid, if greater, For Reissues, see below

## FEE CALCULATION (continued) Technology Center 2100

### 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	420.00
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1404	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)  
420.00

## SUBMITTED BY

Name (Print/Type) Thomas S. Ferrill

Registration No. (Attorney/Agent)

42,532

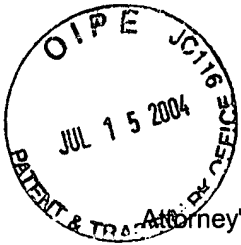
Telephone

(408) 720-8300

Signature

Date

7-12-04



Attorney's Docket No.: 004667.P005

Patent

In re the Application of: Michael R. Lynch, et al.  
(inventor(s))

Application No.: 09/872,938

Filed: May 31, 2001

For: METHOD AND APPARATUS TO A LINK TO A RELATED DOCUMENT  
(title)

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is an Amendment for the above-referenced application.

       Applicant claims small entity status. See 37 CFR 1.27.

       No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total Claims	*43	Minus	**43	0	X9	\$	X18	\$ 0
Indep. Claims	*8	Minus	***8	0	X43	\$	X86	\$ 0
<input type="checkbox"/> First Presentation of Multiple Dependent Claim(s)					+145	\$	+290	\$
					Total Add. Fee	\$	Total Add. Fee	\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

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on July 12, 2004

Date of Deposit

Carla Vignola

Name of Person Mailing Correspondence

Signature

Date

A check in the amount of \$                      is attached for presentation of additional claim(s).  
  X   Applicant(s) hereby Petition(s) for an Extension of Time of   TWO   month(s) pursuant to  
37 C.F.R. § 1.136(a).

       A check for \$                      is attached for processing fees under 37 C.F.R. § 1.17.

       Please charge my Deposit Account No. 02-2666 the amount of \$                     .

**A duplicate copy of this sheet is enclosed.**

  X   The Under Secretary of Commerce for Intellectual Property and Director of the United States  
Patent and Trademark Office is hereby authorized to charge payment of the following fees  
associated with this communication or credit any overpayment to Deposit Account No. 02-2666  
**(a duplicate copy of this sheet is enclosed):**

  X   Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of  
extra claims.

  X   Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date:   7-12-04  

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Reg. No.   42,532